



Office of Executive Inspector General
for the Agencies of the Illinois Governor
www.inspectorgeneral.illinois.gov

COMPLAINT

Please type or print clearly below. Return completed form to: Office of Executive Inspector General, Division of Investigations, 69 West Washington Street, Suite 3400, Chicago, IL 60602. Alternatively, you may fax the form to our office at (312) 814-5479. Our toll-free hotline number is (866) 814-1113. TTY 1-888-261-2734.

(Your) Contact Information:

Name:* _____ Date: _____

*The OEIG accepts anonymous complaints

Age: _____

Sex: ☐ M ☐ F

Address: _____

Street Address

City

State

Zip Code

Home Phone: _____

Business Phone: _____

Other Phone: _____

E-Mail Address: _____

What is your preferred method of contact?

Are you employed by the State of Illinois, a State public university, CTA, Metra, Pace, or RTA?

☐ Yes

☐ No

If yes, which agency? _____

Complaint Information:

Is your complaint against an employee(s), agency, or someone doing business with the State of Illinois, CTA, Metra, PACE, or RTA?

☐ Yes ☐ No

If yes, which agency? _____

Please provide as much detailed information about the individual(s) as possible.

Subject Name (person against whom you are complaining)

Subject's name: _____ Phone: _____

Approximate Age: _____ Sex: ☐ M ☐ F

Address: _____
Street Address

City State Zip Code

Name of Additional Subject: _____ Phone: _____

Approximate Age: _____ Sex: ☐ M ☐ F

Address: _____
Street Address

City State Zip Code

Name of Additional Subject: _____ Phone: _____

Approximate Age: _____ Sex: ☐ M ☐ F

Address: _____
Street Address

City State Zip Code

Name of Additional Subject: _____ Phone: _____

Approximate Age: _____ Sex: ☐ M ☐ F

Address: _____
Street Address

City State Zip Code

Have you notified any other federal, State or local agency of your complaint or filed a lawsuit or grievance related to these matters? ☐ Yes ☐ No

If yes, with which agency did you file a complaint? _____

What is the complaint number? _____

Has your complaint been resolved? ☐ Yes ☐ No

If yes, briefly summarize the results: _____

Have you previously filed a complaint with the OEIG? ☐ Yes ☐ No

If yes, please list any known OEIG case numbers: _____

Is this complaint related to your previously filed OEIG complaint? ☐ Yes ☐ No

Please be aware that complaints relating to management issues may be referred to the affected agency. Once your complaint is referred, you may be contacted by that agency as part of its investigation.

If your complaint is referred, do you want your name and contact information removed? ☐ Yes ☐ No

Please be advised that in order to conduct a thorough investigation involving a whistle blower protection claim, the OEIG may need to disclose your identity. Do you agree to the disclosure of your identity as complainant? ☐ Yes ☐ No ☐ N/A

If the OEIG conducts an investigation, it may forward a report to the affected agency with recommendations for policy/procedure changes and/or discipline. In order to implement the recommendations, the agency may need to contact you. If so, may we reveal your name and contact information to the agency? ☐ Yes ☐ No

Please summarize your complaint, including the date and time of alleged incident(s) (please attach any evidence documentation in support of your complaint):

Please list other person(s) who could be a witness to the misconduct you have alleged:

Name _____ Any identifying information (Agency, Title, Telephone Number, etc.)

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Complaint Taken By:* _____

*To be completed by the OEIG

Illinois law provides that the identity of any individual providing information to an Executive Inspector General shall be kept confidential and may not be disclosed without the consent of that individual or when disclosure of the individual's identity is otherwise required by law. 5 ILCS 430/20-90(a). Illinois law states that any person who intentionally makes, to an Executive Inspector General, a false report alleging misconduct is guilty of a Class A misdemeanor. 5 ILCS 430/50-5(d).